



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 4390

Bib Data Sheet

| | | | | |
|------------------------------------|---|---------------------|-------------------------------|--|
| SERIAL NUMBER 10/674,381 | FILING OR 371(c) DATE 10/01/2003 RULE | CLASS 430 | GROUP ART UNIT 1756 | ATTORNEY DOCKET NO. 501.39055CX1 |
|------------------------------------|---|---------------------|-------------------------------|--|

APPLICANTS

Norio Hasegawa, Nishitama, JAPAN;
 Tsuneo Terasawa, Ome, JAPAN;
 Toshihiko Tanaka, Tokyo, JAPAN;

** CONTINUING DATA *****

This application is a CON of 09/646,036 09/13/2000 PAT 6,677,107
 which is a 371 of PCT/JP00/04339 06/30/2000

** FOREIGN APPLICATIONS *****

JAPAN 11-185221 06/30/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/20/2003

| | | | | |
|--|----------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY JAPAN | SHEETS DRAWING 17 | TOTAL CLAIMS 37 | INDEPENDENT CLAIMS 8 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged | Examiner's Signature | Initials | | |

ADDRESS

020457

TITLE

METHOD OF MANUFACTURING SEMICONDUCTOR INTEGRATED CIRCUIT DEVICE OPTICAL MASK THEREFOR, ITS MANUFACTURING METHOD, AND MASK BLANKS

| | | |
|------------------------------------|---|---|
| FILING FEE RECEIVED 1556 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|------------------------------------|---|---|

PAGE
8/24/06